PTO/SB/08A (08-03)

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Complete if Known Substitute for form 1449/PTO **Application Number** Filing Date INFORMATION DISCLOSURE First Named Inventor Michael A. Jones STATEMENT BY APPLICANT Art Unit (Use as many sheets as necessary) **Examiner Name** Attomey Docket Number 122748.00003US3 Sheet 1

				DOCUMENTS	
Examiner Initials*	Cite No.	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevan Figures Appear
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	<u></u>	Country Code ³ Number ⁴ "Kind Code ⁵ (# known)	MM-DD-YYYY		Or Relevant Figures Appear	1
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Examiner Signature	25	Date Considered	10/3425

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